

# **Nellis Air Force Base Media Application Form**

Thank you for your interest in attending an upcoming Nellis AFB media events. Please complete this form and submit it with a copy of your Letter of Intent to Publish and a signed Hold Harmless Agreement form. Your application is not considered complete until we have received these completed forms. If you have any questions, please contact the Nellis PA office at (702) 652-2750.

## **Personal Information**

NAME: \_\_\_\_\_

DATE OF BIRTH: (MM/DD/YY) \_\_\_\_\_

FULL SOCIAL SECURITY NUMBER: \_\_\_\_\_

DRIVERS LICENSE NUMBER/STATE OF ISSUE: \_\_\_\_\_

PASSPORT INFORMATION: (non-U.S. citizens only)

COUNTRY: \_\_\_\_\_ NUMBER: \_\_\_\_\_

MEDIA AFFILIATION: \_\_\_\_\_

SIZE OF MEDIA AUDIENCE (MONTHLY/ANNUAL): \_\_\_\_\_

JOB DESCRIPTION: \_\_\_\_\_

LETTER OF INTENT TO PUBLISH: (Must be from publisher or owner of outlet) – attach to form

HOLD HARMLESS AGREEMENT FORM: (Sign the form and return it with this completed form.)

## **Contact Information**

EMAIL ADDRESS: \_\_\_\_\_

OFFICE PHONE NUMBER: \_\_\_\_\_

CELL PHONE NUMBER: (Number you can be reached at in the Las Vegas area) \_\_\_\_\_

## **Emergency Contact Information**

NAME: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_

RELATIONSHIP TO YOU: \_\_\_\_\_

## **Editor/Publisher/Owner Contact Information**

NAME: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_

TITLE/POSITION: \_\_\_\_\_

## **Requests**

Please tell us which specific units, aircraft or event you would like to cover. For the complete list, reference our website at <http://www.nellis.af.mil/About/FactSheets.aspx>.

SPECIFIC UNITS/AIRCRAFT/EVENT YOU WANT TO COVER



**DEPARTMENT OF THE AIR FORCE  
HEADQUARTERS 99TH AIR BASE WING (ACC)  
NELLIS AIR FORCE BASE NEVADA**

15 August 2016

**MEMORANDUM FOR MEDIA VISITOR**

**FROM: 99 ABW/PA**

**SUBJECT: Ground Rules and Hold Harmless Agreement**

1. Welcome to Nellis Air Force Base! We appreciate your taking time to visit the installation and look forward to working with you to facilitate your coverage. We ask you to observe the following ground rules to ensure your visit goes as smoothly as possible:
  - a. Please stay with your escort while you are on base and follow the instructions they give. You should ask your escort for a contact number. If you should become accidentally separated, or when another office escorting you is finished with their portion of your visit, please contact our office at (702) 652-2750 to let us know you require a Public Affairs (PA) escort and remain where you are until the escort arrives.
  - b. While most public areas of the base have no restrictions on taking photos or video, certain areas, activities and equipment have security rules. These subjects might not be clearly marked, so please discuss this topic with your escort before you begin shooting. In general, taking photographs and video on the flightline and in nearby industrial areas is prohibited unless specifically authorized in advance.
  - c. Do not shoot photos or video while away from your PA escort as this can lead to being detained or even prosecuted. Should you become detained for any reason, please tell security personnel that you were brought on base by PA and ask them to contact us right away. Be sure to comply with any instructions they give you.
  - d. Be aware of security markings on buildings, fences or walls. Pay particular attention to signs that mark Controlled or Restricted Areas, or red stripes painted on the ground in flightline areas (which also designate Restricted Areas). These mark areas where special authorization or security clearance is required, and where the use of force is authorized to prevent intrusion. Entering these areas, even by mistake, can result in being challenged, detained and/or prosecuted.
  - e. Nellis AFB's normal mission will continue while you are visiting. We ask you to please be courteous to those who are working, and ask your PA escort for assistance if you would like to speak with on duty personnel. Also, please pay careful attention to and follow any safety guidelines or protective equipment requirements you receive to prevent injuries.
  - f. If you are granted access to take photographs or video in sensitive or secure areas, a PA staff member or security program manager may be required to conduct a security and

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policy review of your footage as a condition of granting access. The purpose of this review is to prevent classified, sensitive or technical information that could harm the interests of the United States from being divulged.

2. Please contact one of our staff members or call our office at (702) 652-2750 if you have any questions or concerns.

LEA M. GREENE, GS-12, DAF  
Mission Partner Support,  
99 ABW Public Affairs

1<sup>st</sup> Ind, MEDIA VISITOR

**MEMORANDUM FOR 99 ABW/PA**

By signing below, I \_\_\_\_\_ am acknowledging that I understand the ground rules and agree to abide by them while on Nellis Air Force Base. I acknowledge that there are inherent risks resulting from the use of equipment and participation in events at Nellis Air Force Base, including equipment/facilities owned and operated by and events conducted by the United States Air Force. Any activity on Nellis Air Force Base may include known, unknown or unanticipated risks, inherent and otherwise, may result in property loss, injury, illness or death. I acknowledge that my use of this equipment and/or participation in events is purely voluntary, and with knowledge of the inherent risks involved.

I further certify that I am fully capable of participating in this activity. I expressly acknowledge and assume the inherent risks described above, and all other inherent risks of my presence and participation in events on the installation.

Signature: \_\_\_\_\_

Printed Full Name: \_\_\_\_\_

Media Agency: \_\_\_\_\_

Date: \_\_\_\_\_



DEPARTMENT OF THE AIR FORCE  
99TH SECURITY FORCES SQUADRON (ACC)  
NELLIS AIR FORCE BASE, NEVADA

MEMORANDUM FOR 99 SFS/S5B

**SUBJECT:** Installation Pass Request for **FOREIGN NATIONAL/GUEST**

**SPONSOR:** \_\_\_\_\_ **Contact Number:** \_\_\_\_\_  
(Rank and Full Name) (Including Area Code)

**Sponsor's Home Address:** \_\_\_\_\_  
(Street, City, State, Zip)

**SPOUSE (If Applicable):** \_\_\_\_\_

**I request the below listed person be issued an exception to policy installation pass:**

FULL LEGAL NAME	CITIZENSHIP	DATE OF BIRTH	PASSPORT NUMBER

**\*\*A CLEAR PHOTOCOPY OF VISITOR'S PASSPORT IS REQUIRED FOR OSI\*\***

**AGE:** \_\_\_\_\_ **SCARS/MARKS/TATTOOS:** \_\_\_\_\_  
**SEX:** \_\_\_\_\_ **ALIAS/NICKNAMES/ACCENTS:** \_\_\_\_\_  
**RACE:** \_\_\_\_\_ **STRONG HAND:** \_\_\_\_\_  
**HEIGHT:** \_\_\_\_\_ **POB (City, Country):** \_\_\_\_\_  
**WEIGHT:** \_\_\_\_\_ **CITIZENSHIP NUMBER:** \_\_\_\_\_  
**HAIR COLOR:** \_\_\_\_\_ **CONTACT NUMBER:** \_\_\_\_\_  
**EYE COLOR:** \_\_\_\_\_ **HOME ADDRESS:** \_\_\_\_\_

**DATES OF VISIT & HOURS AUTHORIZED:** \_\_\_\_\_  
(Example: D/M/Y – D/M/Y & Mon-Sun, 0700-1800 hours)

**RELATION TO SPONSOR:** \_\_\_\_\_

**JUSTIFICATION:** (Why installation access is needed)

2. The individual listed above has been briefed on installation entry procedures and conduct while on Nellis AFB. Additionally, the individual has been informed installation access is only authorized per the written provisions of the 99 SFS Defense Force Commander. Return the pass to Pass and Registration when it is replaced (except when lost or stolen) or when the basis for obtaining the pass no longer exists. Failure to comply with the specific access provisions directly by the Defense Force Commander could be grounds for denying a replacement installation pass or possible installation debarment.

The information herein is For Official Use Only (FOUO) and must be protected under the Freedom of Information Act of 1966 and Privacy Act of 1974, as amended. Unauthorized disclosure or misuse of this PERSONAL INFORMATION may result in criminal and/or civil penalties



DEPARTMENT OF THE AIR FORCE  
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3. If there are any questions regarding installation pass request procedures, please contact the Pass and ID office during business hours, 0800 to 1600 hours (office number 652-8681 or office email [99SFSS5B-PassandRegistration@nellis.af.mil](mailto:99SFSS5B-PassandRegistration@nellis.af.mil))

**SPONSOR:** \_\_\_\_\_  
(Rank and Full Name PRINTED/TYPED)

**SPONSOR SIGNATURE:** \_\_\_\_\_

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